


Culturally and Linguistically Competent Health Care for Hispanics


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Experiences from the Field

 A mom comes into the emergency room with a child with abdominal pain and she whispers to the interpreter: “I think my child has *empacho* but I know that doctors here do not believe in it.”




 A man with a tonsillar tumor refuses to drink any fluids because he said it was the cold sodas that he was drinking after working in the hot sun that caused his problem. At his bedside was a pitcher of ice water.








A woman is under observation in a psychiatric unit because the social worker who understood a little Spanish said that her seizures were caused because the patient said she was possessed. With an interpreter, she said she had seizures since she was young and she remembers people around her saying that she was possessed.








 A young man with AIDS was refusing to eat and when asked why through a cultural consultant, he said that he was not being given the right foods for someone that was sick.





 A young child was asked if he had eaten anything before a procedure and he said “no”. Luckily an interpreter insisted on interpreting for mom who said he had eaten one hour before.




 A mom with an infant child with a neuroblastoma insisted that her child had this problem because she had broken a taboo during pregnancy.





 A child died after several missed opportunities of diagnosing an appendicitis. The parents did not speak English and no interpreter was used.


 A mom brings her infant to the emergency room and says that her child has “*caida de mollera*” (fallen fontanelle).





 When a mom was asked what she thought had caused her daughter's chronic illness, she said it was due to a jealous girlfriend who had "hexed" her child.



 A CPS referral was in the works for a mother refusing to breastfeed her newborn. Nurses were also complaining that she refused to bathe. She had just had a C-section.

Access to Care

- ***Healthy Arizona 2010*** set as a goal “improving access to quality and quantity of the life for all Arizonans.”
- Aside from the many medical disparities that exist for Hispanics, they are faced with the barriers of culture and language . . . “suggesting the need for the broad availability of **culturally competent care.**”




Objective 4: Healthy Arizona 2010

 “Increase the cultural competency and cultural sensitivity of health care providers.”



What is cultural competence?

 Cultural competence is a set of congruent behaviors, attitudes, and policies that . . . (allow) professionals to work effectively in cross-cultural situations.

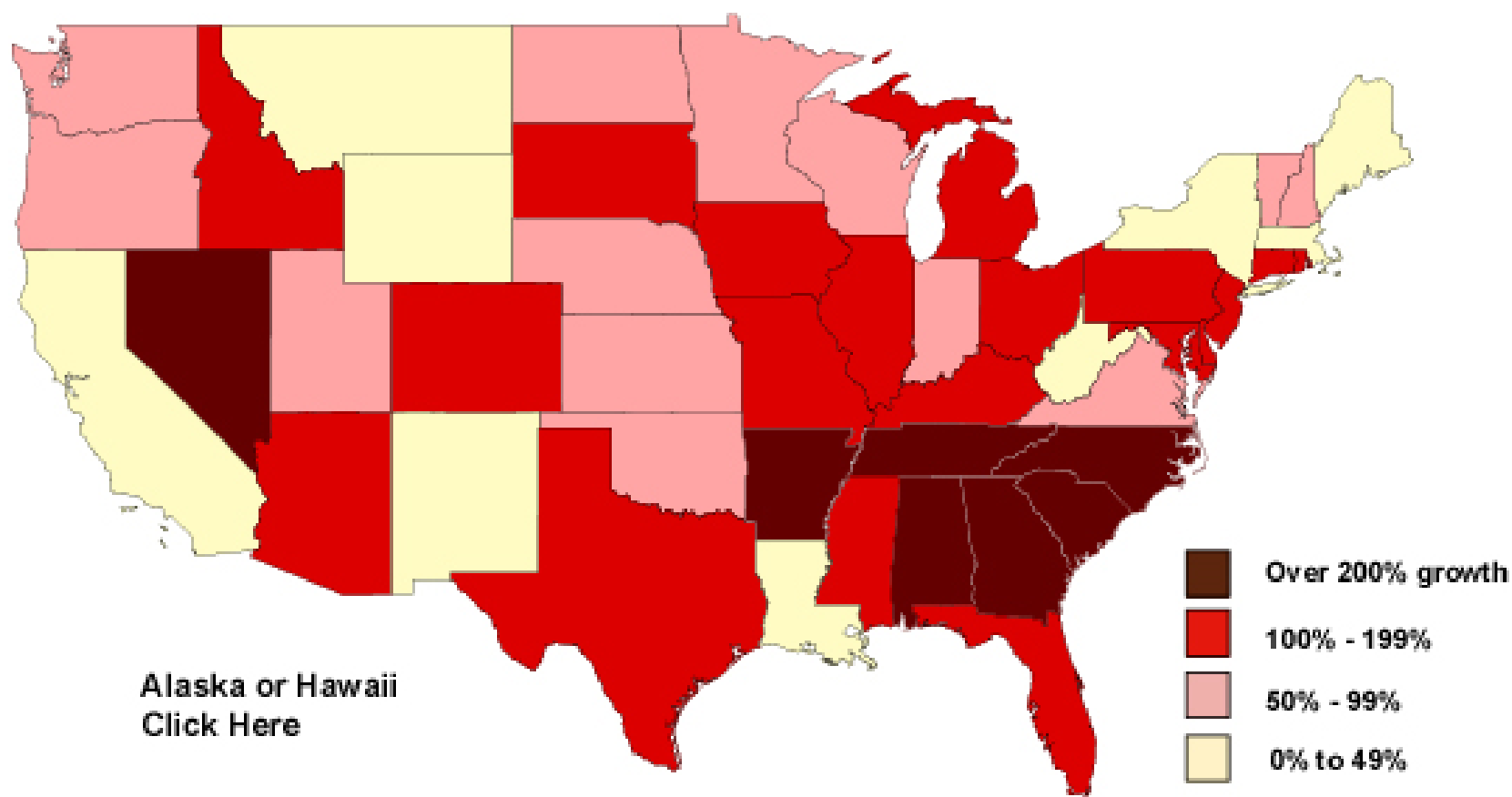
- Cross, Terry et.al., (1989) Towards a Culturally Competent System of Care, vol I (Monograph) Washington, D.C. Georgetown University Child Development Center.



Growth in the Latino Population

1990 - 2000

Click on your state for a full listing of county level population data



Source: U.S. Census, 2000



GROWTH IN THE LATINO POPULATION

County	State	4/1/2000 Hispanic	4/1/1990 Hispanic	Numeric Change	Percent Change
Apache County	AZ	3,119	2,599	520	20.0%
Cochise County	AZ	36,134	28,379	7,755	27.3%
Coconino County	AZ	12,727	9,696	3,031	31.3%
Gila County	AZ	8,546	7,486	1,060	14.2%
Graham County	AZ	9,054	6,682	2,372	35.5%
Greenlee County	AZ	3,681	3,456	225	6.5%
La Paz County	AZ	4,420	3,139	1,281	40.8%
Maricopa County	AZ	763,341	345,498	417,843	120.9%
Mohave County	AZ	17,182	4,919	12,263	249.3%
Navajo County	AZ	8,011	5,652	2,359	41.7%
Pima County	AZ	247,578	163,262	84,316	51.6%
Pinal County	AZ	53,671	34,062	19,609	57.6%
Santa Cruz County	AZ	31,005	23,221	7,784	33.5%
Yavapai County	AZ	16,376	6,899	9,477	137.4%
Yuma County	AZ	80,772	43,388	37,384	86.2%

“State’s Hispanic population shows growth in diversity and ancestry--
Viva la diversidad” (AZ Republic, 5/10/2001)

■ “Arizona’s Hispanic population, although still overwhelmingly of Mexican ancestry, has become more than twice as international in origin in the past decade.”



State's Hispanic population . . .

- “Nearly 1.1 million Arizonans, or 82% of state’s Hispanics, traced their heritage to Mexico.”
- “Arizona ranks sixth among the states for the number of Hispanics, behind California, Texas, New York, Florida and Illinois.”
- “Arizona has the fourth-highest number of Mexican ancestry Hispanics, behind California, Texas and Illinois.”

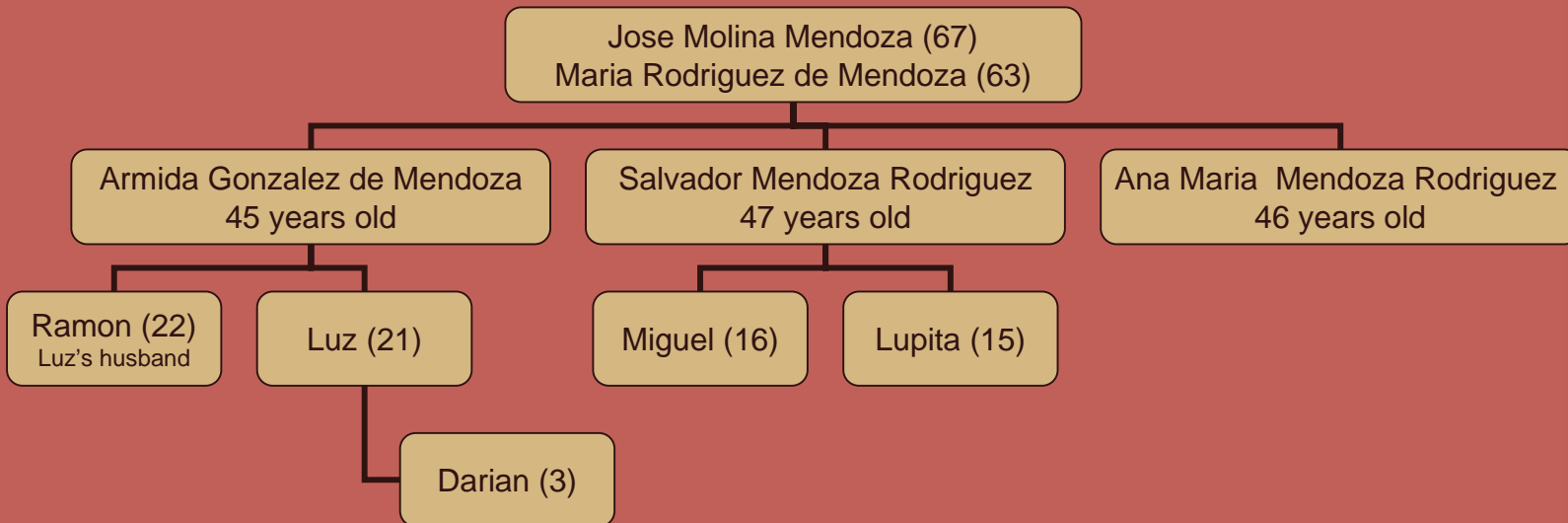


Mexican American Diversity

- Mexican Americans who have lived in the U.S. for generations
- U.S. born and educated Mexican Americans living in urban and rural settings
- Immigrants from large urban Mexican cities who seek better economic and educational opportunities]
- Mexican undocumented workers from rural Mexico



Familia Mendoza






Health Related Ethnic and Cultural Differences

- Experience of pain and problems
- Labels for symptoms or indicators
- Communication of pain and problems
- Beliefs about the problem and cause
- Attitude about health care providers
- Expectations about treatment
- Personal involvement and responsibility










Contrasting beliefs, values, and practices

Latino traditional culture

-  Collective orientation
-  Interdependence
-  Collective group identity
-  Cooperation
-  Saving face
-  Relaxed with time
-  Interpersonal relationships emphasized







Mainstream culture

-  Individual orientation
-  Independence
-  Individual identity
-  Competition
-  Being direct
-  Time sensitive
-  Emphasis on task not on relationships









Beliefs, values and practices . . . ,

Latino Culture

-  Spiritual/magical belief orientation
-  More recent agrarian influence
-  Patriarchal family structure
-  Relaxed child development
-  Overt respect for elderly
-  Extended family

Mainstream culture

-  Rational/empirical orientation
-  More urbanized industrial influence
-  Democratic family structure
-  Strong expectations for child development
-  Less values in respect for elderly
-  Nuclear family




Cultural assessment

- **C**ulture of origin
- **U**nderlying health beliefs
- **L**oved ones or support involved
- **T**reatment barriers
- **U**nderstand you, treatment, follow-up and system
- **R**eaction, emotions, and mental status exam
- **A**cculturation status

– Marya Cota PhD and Irma Bustamante (1998)



Kleinman's Questions

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- 1. What do you call this problem?
 - 2. What do you think caused the problem?
 - 3. Why do you think it started when it did?
 - 4. What do you think the sickness does? How does it work?
 - 5. How severe is the sickness? Will it have a short or long course?
 - 6. What kind of treatment should the patient receive? What are the most important results you hope he receives from this treatment?
 - 7. What are the chief problems the sickness caused?
 - 8. What do you fear most about the sickness?

Healthy Arizona 2010 Strategies

- ❏ “Identify best practices related to increasing the cultural competency and cultural sensitivity of health care providers.
- ❏ Increase availability of and participation in continuing education that promotes cultural competency and cultural sensitivity for health care providers.



Healthy Arizona 2010 Strategies

- Increase availability of and participation in training that promotes cultural competency and cultural sensitivity among students in health care professional education programs.
- Increase the number of minority students in the health care professions in order to promote greater attention to and understanding of issues related to cultural competency in health care education and practice.”



Identifying “Best” Practices in the Provision of Language Services

- Title VI of the Civil Rights Act of 1964
 - <http://www.hhs.gov/ocr/lep/revisedlep.html>
- National Standards for Culturally and Linguistically Appropriate Services in Health Care (CLAS standards)
 - <http://www.omhrc.gov/clas/>
- “Struggle to Communicate—An Arizona Policy Primer”, April 2004
 - http://www.slhi.org/publications/policy_primers/pdfs/p-2004-04.pdf



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